POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M G		11/18/99
O.I.P.E. CLASSIFIER			2, 10/30/...
FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appea'
÷	.... Restricted	O	.... Objected

BEST AVAILABLE COPY

Claim Final	Original	Date						Claim Final	Original	Date						Claim Final	Original	Date				
	①	✓	✓						51							101						
	2	✓	✓						52							102						
	3	✓	✓						53							103						
	4	✓	✓						54							104						
	5	✓	✓						55							105						
	6	✓	✓						56							106						
	⑦	✓	✓						57							107						
	8	✓	✓						58							108						
	9	✓	✓						59							109						
	10	✓	✓						60							110						
	11	✓	✓						61							111						
	12	✓	✓						62							112						
	13	✓	✓						63							113						
	⑭	✓	✓						64							114						
	15	✓	✓						65							115						
	16	✓	✓						66							116						
	17	✓	✓						67							117						
	18	✓	✓						68							118						
	19	✓	✓						69							119						
	20	✓	✓	✓					70							120						
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	47								97							147						
	48								98							148						
	49								99							149						
	50								100							150						

If more than 150 claims or 10 actions
staple additional sheet here

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